

Good afternoon, Senator Anwar and members of the Public Health and Human Services committees. Thank you for the opportunity to speak today about Accessible Diagnostic Medical Equipment. I was a social worker that worked primarily with individuals that had various disabilities, and I myself have a disability.

In 2003, as an employee of the University of Connecticut Health Center I had the opportunity to speak with a group of medical students who had a specific interest in Cerebral Palsy, the condition that I live with. These were some of the brightest men and women I have ever had the opportunity to come in contact with. Just recently within the last year or so another group of medical students from the Disabilities Interest Group at UConn informed me that while an examination can be done in a person's wheelchair, it is nowhere near as effective as actually getting up on an examination table and allowing medical students, or qualified professionals to do an examination. I was informed that, laying down and having these dedicated professionals palpate certain areas was critical in assessing health, and identifying certain conditions before they become either difficult to treat or not treatable.

This information took me aback a bit, as I have not actually been on an examination table for about the last 20 years. Since about the age of 30, I have been unable to transfer to any diagnostic equipment unassisted. I have attempted to transfer onto medical equipment and it was not well received. For

example I needed an x-ray performed my stomach, and I managed to get about three quarters of the way to the x-ray machine before a technician informed me that I would have to walk the rest of the way. I attempted to do this with a walker, and unsteadily made my way to the x-ray table. I forced my legs into the appropriate position on the table, the x-ray was taken, and immediately afterwards I heard the words, "Looks good, let's get him out of here!" This was said in such a manner as to indicate that I was a liability to the staff, and my assessment was confirmed when a staff member indicated that in the future, if I needed an x-ray that I would have to do it at a hospital. No mention of any equipment such as a Hoyer lift, that might make the experience better for all, no guidance given as to how to request an outpatient x-ray at a hospital. Despite the Americans with Disabilities Act of 1990, which requires auxiliary aids to be provided so that individuals with disabilities may access services, the message I received was very clear and it was "You cannot get an x-ray here in the future, we will not help you, and it is not our problem, it is yours alone."

I have no doubt that today you will hear from many individuals about what is not possible. For example, providing assistance to individuals with disabilities takes too much time and is under compensated. I believe that a rational approach to this issue starts in the area of primary care. At minimum, in my opinion, it is possible for large group practices and other facilities primarily engaged in the practice of providing diagnostic and/ or treatment services to have the equipment necessary and staff

trained to ensure that individuals with disabilities receive a full examination, and an accurate weight be established and reevaluated. For the record, I have not been weighed since I was under the age of 21, outside of an inpatient setting. In my vision for the future, this would be an interim step on the way to ensuring that machines like MRI scanners are accessible to all, and delays in care are eliminated. As a social worker I can definitively state that while I'm not aware of anybody that has died as a result of not having access to Accessible Diagnostic Medical Equipment, I am aware of "close calls" where people could not access appropriate diagnostic equipment and as a result, treatment was delayed and recovery much more complicated.

I have heard discussions around a five year plan being developed and implemented to resolve this issue. In my experience, a five year plan can easily turn into a 25 year plan, well written, but sitting on a shelf without strong leadership, and determination by all parties to accomplish defined goals. I would be dishonest to the legislature and all Connecticut citizens if I said this was not a concern of mine.

I hope that is that this forum is followed up by a planning process that includes individuals with disabilities, and results in actions, legislative or other, that will lead to the mitigation of this issue. Thank you for your time, in the event that there are any questions, I will attempt to answer them.